Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

50353-577

| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | SMALL ENTITY TYPE | | | OR | OTHER THAN OR SMALL ENTITY | |
|--|--|---|-----------------|--------------|-------------------------------|------------------|-------------------|----------|------------------------|--------------|----------------------------|------------------------|
| TOTAL CLAIMS | | | 20 | | | | RAT | Ε | FEE | | RATE | FEE |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | BASIC | EE | 370.00 | OR | BASIC FEE | 740.00 |
| TOTAL CHARGEABLE CLAIMS | | | 24 minus 20= | | * 4 | | X\$ 9 | = | | OR | X\$18= | 72 |
| INDEPENDENT CLAIMS | | | 2 minus 3 = | | * | | X42: | = | | OR | X84= | |
| MU | LTIPLE DEPEN | IDENT CLAIM P | ESENT | | | | +140 | = | | OR | +280= | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | TOTA | Ĺ | | OR | TOTAL | 812 |
| CLAIMS AS AMENDED - PART II | | | | | | | | | | | OTHER THAN | |
| | | (Column 1) | - | | mn 2) | (Column 3) | SMAI | .L. E | NTITY | OR | SMALL | |
| AMENDMENT A | J. 1 | CLAIMS REMAINING AFTER AMENDMENT | 2.0 | NUM PREVI | HEST MBER OUSLY FOR | PRESENT EXTRA | RATI | = | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | X\$ 9 | = | | OR | X\$18= | |
| | Independent | * NTATION OF MI | Minus | *** | T CL AIM | = - | X42= | = | | OR | X84= | |
| | FINST PRESE | INTATION OF MI | ULTIPLE DEP | ENDEN | T CLAIN | | +140 | =. | | OR | +280= | |
| | | | | | | | | AL EE | | OR | TOTAL ADDIT. FEE | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | NUN PREVI | HEST MBER IOUSLY FOR | PRESENT EXTRA | RATI | = | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | X\$ 9 | - | | OR | X\$18= | |
| | Independent | * | Minus | *** | | = | X42: | | | OR | X84= | |
| Ľ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | | OR | +280= | |
| | +14· | | | | | | | | | | TOTAL | |
| | | ADDIT. F | EE | | OR | ADDIT. FEE | | | | | | |
| | | (Column 1) | | | imn 2) HEST | (Column 3) | | | | | | |
| AMENDMENT C | | REMAINING AFTER AMENDMENT | | NUN PREV | MBER IOUSLY FOR | PRESENT EXTRA | RATE | = | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | X\$ 9 | - | | OR | X\$18= | |
| | Independent | * | Minus | *** | IT CL AIM | = | X42= | | | OR | X84= | |
| L | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | | OR | +280= | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE | | | | | | | | | | OR | TOTAL ADDIT. FEE | |
| | If the "Highest Nu | imber Previously P nber Previously Pa | aid For" IN THI | S SPACE | is less that | an 3, enter "3." | ADD11.1 | | propriate box | , k in co | | |